



File Copy
Accounting Copy

RECEIVED

MAR 04 2004

Technology Center 2600

REQUEST FOR EXTENSION OF TIME

Docket Number: _____

Extension	Working Attorney's initials	Date	Managing Partner's signature (for unbillable EOTs only)	Date	Billable (B)/ Unbillable (U)	Reason (see reason codes below)
First	cmv	2/27/04		2/27/04	B	1
Second						
Third						
Fourth						
Fifth						

Check Number: _____ Amount: \$ _____
(Please remember to use a separate check for paying extension fees.)

Reason Codes:

- 1 No client instructions
 - 2 Late client instructions
 - 3 Special Letter sent out late
 - 4 Workload too heavy
 - 5 Associate received file from partner too close to due date
 - 6 Client instructions not associated with file
 - 7 File could not be located
 - 8 Inclement weather
 - 9 Other _____
- _____
- _____
- _____

Note: Submit form to Accounting only when check is cut.